

County: Milwaukee  
SOUTH SHORE MANOR  
1915 EAST TRIPOLI AVENUE  
ST. FRANCIS 53235 Phone: (414) 483-3611

Facility ID: 8240

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Operated from 1/1 To 12/31 Days of Operation: 365  
Operate in Conjunction with Hospital? No  
Number of Beds Set Up and Staffed (12/31/01): 34  
Total Licensed Bed Capacity (12/31/01): 34  
Number of Residents on 12/31/01: 33

Ownership:  
Highest Level License:  
Operate in Conjunction with CBRF? No  
Title 18 (Medicare) Certified? Yes  
Title 19 (Medicaid) Certified? Yes  
Average Daily Census: 33

Corporation  
Skilled  
No  
Yes  
Yes  
33

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Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/01)				Length of Stay (12/31/01)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		51.5
Supp. Home Care-Personal Care	No					1 - 4 Years		39.4
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	0.0	More Than 4 Years		9.1
Day Services	No	Mental Illness (Org./Psy)	42.4	65 - 74	6.1			-----
Respite Care	No	Mental Illness (Other)	3.0	75 - 84	36.4			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	48.5	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	9.1	Full-Time Equivalent		
Congregate Meals	No	Cancer	0.0		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	0.0		100.0	(12/31/01)		
Other Meals	No	Cardiovascular	3.0	65 & Over	100.0	-----		
Transportation	No	Cerebrovascular	12.1		-----	RNs		12.0
Referral Service	No	Diabetes	0.0	Sex	%	LPNs		8.9
Other Services	No	Respiratory	9.1		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	30.3	Male	12.1	Aides, & Orderlies		39.2
Mentally Ill	No		-----	Female	87.9			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	No				100.0			

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#### Method of Reimbursement

Level of Care	Medicare (Title 18)			Medicaid (Title 19)			Other		Private Pay			Family Care			Managed Care			Total Resi- dents	% Of All	
	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)			
Int. Skilled Care	0	0.0	0	1	5.0	123	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	3.0
Skilled Care	3	100.0	245	19	95.0	106	0	0.0	0	9	100.0	163	0	0.0	0	1	100.0	234	32	97.0
Intermediate	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	3	100.0		20	100.0		0	0.0		9	100.0		0	0.0		1	100.0		33	100.0

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Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/01				
				% Needing Assistance of One Or Two Staff	% Totally Dependent	Total Number of Residents
Percent Admissions from		Activities of	%			
Private Home/No Home Health	8.6	Daily Living (ADL)	Independent			
Private Home/With Home Health	0.0	Bathing	0.0	51.5	48.5	33
Other Nursing Homes	11.4	Dressing	18.2	42.4	39.4	33
Acute Care Hospitals	77.1	Transferring	24.2	42.4	33.3	33
Psych. Hosp. -MR/DD Facilities	0.0	Toilet Use	18.2	39.4	42.4	33
Rehabilitation Hospitals	0.0	Eating	69.7	15.2	15.2	33
Other Locations	2.9	*****				
Total Number of Admissions	35	Continence	%	Special Treatments		%
Percent Discharges To:		Indwelling Or External Catheter	9.1	Receiving Respiratory Care		0.0
Private Home/No Home Health	2.8	Occ/Freq. Incontinent of Bladder	48.5	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	2.8	Occ/Freq. Incontinent of Bowel	33.3	Receiving Suctioning		0.0
Other Nursing Homes	0.0			Receiving Ostomy Care		6.1
Acute Care Hospitals	16.7	Mobility		Receiving Tube Feeding		6.1
Psych. Hosp. -MR/DD Facilities	0.0	Physically Restrained	0.0	Receiving Mechanically Altered Diets		24.2
Rehabilitation Hospitals	0.0					
Other Locations	8.3	Skin Care		Other Resident Characteristics		
Deaths	69.4	With Pressure Sores	9.1	Have Advance Directives		100.0
Total Number of Discharges		With Rashes	3.0	Medications		
(Including Deaths)	36			Receiving Psychoactive Drugs		21.2

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## Selected Statistics: This Facility Compared to All Similar Milwaukee Metropolitan Area Facilities &amp; Compared to All Facilities

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	This Facility %	Ownership: Proprietary Peer Group Ratio	Bed Size: Under 50 Peer Group Ratio	Licensure: Skilled Peer Group Ratio	All Facilities % Ratio				
Occupancy Rate: Average Daily Census/Licensed Beds	97.1	77.1	1.26	69.0	1.41	82.7	1.17	84.6	1.15
Current Residents from In-County	100	82.7	1.21	82.5	1.21	85.3	1.17	77.0	1.30
Admissions from In-County, Still Residing	48.6	19.1	2.54	28.7	1.70	21.2	2.29	20.8	2.33
Admissions/Average Daily Census	106.1	173.2	0.61	122.8	0.86	148.4	0.71	128.9	0.82
Discharges/Average Daily Census	109.1	173.8	0.63	120.0	0.91	150.4	0.73	130.0	0.84
Discharges To Private Residence/Average Daily Census	6.1	71.5	0.08	11.0	0.55	58.0	0.10	52.8	0.11
Residents Receiving Skilled Care	100	92.8	1.08	72.7	1.38	91.7	1.09	85.3	1.17
Residents Aged 65 and Older	100	86.6	1.15	93.0	1.08	91.6	1.09	87.5	1.14
Title 19 (Medicaid) Funded Residents	60.6	71.1	0.85	60.8	1.00	64.4	0.94	68.7	0.88
Private Pay Funded Residents	27.3	13.9	1.97	21.0	1.30	23.8	1.15	22.0	1.24
Developmentally Disabled Residents	0.0	1.3	0.00	0.0	.	0.9	0.00	7.6	0.00
Mentally Ill Residents	45.5	32.5	1.40	41.3	1.10	32.2	1.41	33.8	1.35
General Medical Service Residents	30.3	20.2	1.50	25.9	1.17	23.2	1.31	19.4	1.56
Impaired ADL (Mean)	55.8	52.6	1.06	53.3	1.05	51.3	1.09	49.3	1.13
Psychological Problems	21.2	48.8	0.44	46.2	0.46	50.5	0.42	51.9	0.41
Nursing Care Required (Mean)	6.1	7.3	0.83	7.8	0.78	7.2	0.84	7.3	0.83